



45th ANNUAL MT. MADONNA CHALLENGE
SATURDAY, August 28, 2021
5K, 10K, HALF
GILROY, CALIFORNIA

- Location** : Sprig Lake, Mt. Madonna County Park
- Parking** : Limited! Please carpool if possible.
- Time** : Race day registration begins at 7:00 am
HALF starts at 8:00 am
5k & 10k start at 8:30 am
- Entry Fee** : Pre-Register by July 31st, \$40 5K, \$50 10K, \$65 HALF
Includes tech shirt
After July 31st & Race Day, \$45 5K, \$55 10K, \$70 HALF
Shirt not guaranteed
- Course** : **Scenic trail run!** Steep course through the redwoods
- Website** : Register @ ultrasignup.com Info & directions @ mtmadonnachallenge.com

Scan me!



Like us on facebook.com/madonnachallenge and follow us on Instagram!

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Mail completed form and check payable to Mt. Madonna Challenge, P.O. Box 323, San Martin, CA 95046-0323. For more race information call José Cruz at (408)856-4430 or email mtmadonnachallenge@gmail.com.

Name _____	Check Race Entered & Gender
Address _____	<input type="checkbox"/> 5k <input type="checkbox"/> 10k <input type="checkbox"/> HALF
City _____ State _____ Zip _____	<input type="checkbox"/> Male <input type="checkbox"/> Female
Email _____	Age on Race Day: _____
T shirt Size: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	
How do you hear about this race? <input type="checkbox"/> Flyer <input type="checkbox"/> Friend <input type="checkbox"/> Social Media <input type="checkbox"/> Email	

EMERGENCY CONTACT (Name and phone): _____

In consideration of the acceptance of this entry, I hereby, for myself and my heirs, executors and administrators, waive any and all rights, claims and damages I may have against the sponsors, volunteers, medical staff, coordination groups, South Valley Running Club, SVE Timing and any other entities, volunteers and/or individuals associated with said event even though liability may arise out of negligence or carelessness on the part of the person or entities mentioned above. None of the above are responsible for the loss of personal items nor any other form of aggravation in connection with said event. I also give permission for the free use of my name and picture in any broadcast, telecast, or print media account of the event. I understand that all participants must obey the lawful order of a police officer, safety official and medical staff. In filling out this form, I acknowledge I have read and fully understand my own liability and do accept the restrictions and responsibilities. Entry fees are NOT transferable and NON refundable.

Signature

Date

Parent/Guardian Signature If Under 18